

**HELEN FERRE**

## ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

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IMPORTANT: Mark all packages and papers with contract and/or order numbers

1. DATE OF ORDER 02/21/2001		2. CONTRACT NO. (If any)		6. SHIP TO:				
3. ORDER NO. P110-8098		4. REQUISITION/REFERENCE NO. 00-2013		a. NAME OF CONSIGNEE Office of Cuba Broadcasting				
5. ISSUING OFFICE (Address correspondence to) Office of Cuba Broadcasting 4201 N.W. 77th Avenue Miami FL 33166				b. STREET ADDRESS 4201 N.W. 77th Avenue				
				c. CITY Miami		d. STATE FL	e. ZIP CODE 33166	
7. TO:				f. SHIP VIA				
a. NAME OF CONTRACTOR HELEN FERRE								
b. COMPANY NAME				8. TYPE OF ORDER				
c. STREET ADDRESS (b) (6)				<input checked="" type="checkbox"/> a. PURCHASE REFERENCE YOUR:  Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheets, if any, including delivery as indicated.		<input type="checkbox"/> b. DELIVERY  Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.		
d. CITY (b) (6)		e. STATE (b) (6)	f. ZIP CODE (b) (6)					
9. ACCOUNTING AND APPROPRIATIONS DATA 9568-01-X0208-1085-1-448610-8051-2580				10. REQUISITIONING OFFICE Office of Cuba Broadcasting				
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input checked="" type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input checked="" type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED								
12. F.O.B. POINT Destination		13. PLACE OF a. INSPECTION Destination		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 02/14/2001		
		b. ACCEPTANCE Destination				16. DISCOUNT TERMS Net 30		
17. SCHEDULE (See reverse for Rejections)								
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	Tax ID Number: (b) (6) DUNS Number: Not Available  Serve as guest for the recording of round table discussion program "Mesa Redonda" on 2/14/01 Continued ...			1	EA	75.00	75.00	
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.				17(h). TOTAL (Cont. pages)
SEE BILLING INSTRUCTIONS ON REVERSE		21. MAIL INVOICE TO:					\$0.00	17(i). GRAND TOTAL
		a. NAME Office of Cuba Broadcasting						
		b. STREET ADDRESS (or P.O. Box) 4201 N.W. 77th Avenue						
c. CITY Miami		d. STATE FL	e. ZIP CODE 33166			\$75.00		
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) Mary Ann Amps TITLE: CONTRACTING/ORDERING OFFICER				

If desired, this order (or a copy thereof) may be used by the Contractor as the Contractor's invoice, instead of a separate invoice, provided the following statement, (signed and dated) is on (or attached to) the order: "Payment is requested in the amount of \$ \_\_\_\_\_. No other invoice will be submitted." However, if the Contractor wishes to submit an invoice, the following information must be provided; contract number (if any), order number, item number(s), description of supplies or service, sizes, quantities, unit prices, and extended totals. Prepaid shipping costs will be indicated as a separate item on the invoice. Where shipping costs exceed \$10 (except for parcel post), the billing must be supported by a bill of lading or receipt. When several orders are invoiced to an ordering activity during the same billing period, consolidated periodic billings are encouraged.

Quantity in the "Quantity Accepted" column on the face of this order has been: ☐ inspected, ☐ accepted, ☐ received  
by me and conforms to this contract. Items listed below have been rejected for the reasons indicated.

SHIPMENT NUMBER	PARTIAL		DATE RECEIVED	SIGNATURE OF AUTHORIZED U.S. GOV'T REP.	DATE
	FINAL				
TOTAL CONTAINERS		GROSS WEIGHT	RECEIVED AT	TITLE	

[illegible]

**ORDER FOR SUPPLIES OR SERVICES**  
**SCHEDULE - CONTINUATION**

PAGE OF PAGES

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**IMPORTANT:** Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER CONTRACT NO.

02/21/2001

ORDER NO.

P110-8098

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	Total amount of award: \$75.00. The obligation for this award is shown in box 17(i).					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

ORDER FOR SUPPLIES OR SERVICES						PAGE OF PAGES		
IMPORTANT: Mark all packages and papers with contract and/or order numbers						1	3	
1. DATE OF ORDER 03/12/2001		2. CONTRACT NO. (if any)		8. SHIP TO:				
3. ORDER NO. P110-8108		4. REQUISITION/REFERENCE NO. 00-2013		a. NAME OF CONSIGNEE Office of Cuba Broadcasting				
5. ISSUING OFFICE (Address correspondence to) Office of Cuba Broadcasting 4201 N.W. 77th Avenue Miami FL 33166				b. STREET ADDRESS 4201 N.W. 77th Avenue				
				c. CITY Miami		d. STATE FL	e. ZIP CODE 33166	
7. TO:				f. SHIP VIA				
a. NAME OF CONTRACTOR HELEN FERRE								
b. COMPANY NAME				8. TYPE OF ORDER				
c. STREET ADDRESS (b) (6)				<input checked="" type="checkbox"/> a. PURCHASE REFERENCE YOUR:		<input type="checkbox"/> b. DELIVERY <small>Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.</small>		
d. CITY (b) (6)				e. STATE (b) (6)		f. ZIP CODE (b) (6)		
9. ACCOUNTING AND APPROPRIATIONS DATA 9568-01-X0208-1085-1-448610-8051-2580				10. REQUISITIONING OFFICE Office of Cuba Broadcasting				
11. BUSINESS CLASSIFICATION (Check appropriate box(es))								
<input type="checkbox"/> a. SMALL		<input type="checkbox"/> b. OTHER THAN SMALL		<input type="checkbox"/> c. DISADVANTAGED		<input type="checkbox"/> d. WOMEN-OWNED		
12. F.O.B. POINT Destination		13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 03/06/2001		
a. INSPECTION Destination		b. ACCEPTANCE Destination				16. DISCOUNT TERMS Net 30		
17. SCHEDULE (See reverse for Rejections)								
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	Tax ID Number: (b) (6) DUNS Number: Not Available  Serve as guest for the recording of round table discussion program "Actualidad Mundial" on 3/6/01 Continued ...			2	EA	75.00	150.00	
SEE BILLING INSTRUCTIONS ON REVERSE		18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h). TOTAL (Cont. pages)
		21. MAIL INVOICE TO:						
		a. NAME Office of C		a. Broadcasting				\$0.00
		b. STREET ADDRESS (or P.O. Box) 4201 N.W. 7		b. Avenue				
		c. CITY Miami		d. STATE FL	e. ZIP CODE 33166		\$150.00	17(i). GRAND TOTAL
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) Mary Ann Amps TITLE: CONTRACTING/ORDERING OFFICER				



ORDER FOR SUPPLIES OR SERVICES  
SCHEDULE - CONTINUATION

PAGE OF PAGES

3

3

**IMPORTANT:** Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER

CONTRACT NO.

ORDER NO.

03/12/2001

P110-8108

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	Total amount of award: \$150.00. The obligation for this award is shown in box 17(i).					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

# ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 3

**IMPORTANT: Mark all packages and papers with contract and/or order numbers**

1. DATE OF ORDER 09/26/2001		2. CONTRACT NO. (If any)		6. SHIP TO:			
3. ORDER NO. P110-8261		4. REQUISITION/REFERENCE NO. 00-2013		a. NAME OF CONSIGNEE Office of Cuba Broadcasting			
5. ISSUING OFFICE (Address correspondence to) Office of Cuba Broadcasting 4201 N.W. 77th Avenue Miami FL 33166				b. STREET ADDRESS 4201 N.W. 77th Avenue			
				c. CITY Miami	d. STATE FL	e. ZIP CODE 33166	
7. TO:				f. SHIP VIA			
a. NAME OF CONTRACTOR HELEN FERRE							
b. COMPANY NAME				8. TYPE OF ORDER			
c. STREET ADDRESS (b) (6)				X a. PURCHASE REFERENCE YOUR:		b. DELIVERY	
				Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheets, if any, including delivery as indicated.		Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
d. CITY (b) (6)		e. STATE (b) (6)	f. ZIP CODE (b) (6)				
9. ACCOUNTING AND APPROPRIATIONS DATA 9568-01-X0208-1085-1-448610-8051-2580				10. REQUISITIONING OFFICE Office of Cuba Broadcasting			
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) X a. SMALL      b. OTHER THAN SMALL      c. DISADVANTAGED      d. WOMEN-OWNED							
12. F.O.B. POINT Destination		13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 09/12/2001	
a. INSPECTION Destination		b. ACCEPTANCE Destination				16. DISCOUNT TERMS Net 30	
17. SCHEDULE (See reverse for Rejections)							
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
0001	Tax ID Number: (b) (6) DUNS Number: Not Available  Serve as guest for the recording of round table discussion program "Mesa Redonda" on 9/12/01 Continued ...			1	EA	75.00	75.00
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h). TOTAL (Cont. pages)	
21. MAIL INVOICE TO:							
a. NAME Office of Cuba Broadcasting						\$0.00	
b. STREET ADDRESS (or P.O. Box) 4201 N.W. 77th Avenue							
c. CITY Miami		d. STATE FL	e. ZIP CODE 33166			\$75.00	
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) Mary Ann Amps TITLE: CONTRACTING/ORDERING OFFICER			

NSN 7540-01-152-8083

PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 8/65)

Prescribed by GSA/FAR (48 CFR) 53.213(g)





**ORDER FOR SUPPLIES OR SERVICES**  
**SCHEDULE - CONTINUATION**

PAGE OF PAGES

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**IMPORTANT:** Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER

CONTRACT NO.

ORDER NO.

09/26/2001

P110-8261

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	Total amount of award: \$75.00. The obligation for this award is shown in box 17(i).					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

# ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

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IMPORTANT: Mark all packages and papers with contract and/or order numbers

1. DATE OF ORDER 09/11/2001		2. CONTRACT NO. (if any)		6. SHIP TO:			
3. ORDER NO. P110-8252		4. REQUISITION/REFERENCE NO. 00-2013		a. NAME OF CONSIGNEE Office of Cuba Broadcasting			
5. ISSUING OFFICE (Address correspondence to) Office of Cuba Broadcasting 4201 N.W. 77th Avenue Miami FL 33166				b. STREET ADDRESS 4201 N.W. 77th Avenue			
				c. CITY Miami	d. STATE FL	e. ZIP CODE 33166	
7. TO:				f. SHIP VIA			
a. NAME OF CONTRACTOR HELEN FERRE							
b. COMPANY NAME				8. TYPE OF ORDER			
c. STREET ADDRESS (b) (6)				<input checked="" type="checkbox"/> a. PURCHASE REFERENCE YOUR:  Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheets, if any, including delivery as indicated.		<input type="checkbox"/> b. DELIVERY  Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
d. CITY (b) (6)		e. STATE (b) (6)	f. ZIP CODE (b) (6)				
9. ACCOUNTING AND APPROPRIATIONS DATA 9568-01-X0208-1085-1-448610-8051-2580				10. REQUISITIONING OFFICE Office of Cuba Broadcasting			
11. BUSINESS CLASSIFICATION (Check appropriate box(es))							
<input checked="" type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED							
12. F.O.B. POINT Destination		13. PLACE OF		14. GOVERNMENT B/L/NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 09/04/2001	
a. INSPECTION Destination		b. ACCEPTANCE Destination				16. DISCOUNT TERMS Net 30	
17. SCHEDULE (See reverse for Rejections)							
ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)	
0001	Tax ID Number: (b) (6) DUNS Number: Not Available Serve as guest for the recording of round table discussion program "Actualidad Mundial" on 9/4/01 Continued ...	2	EA	75.00	150.00		
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h). TOTAL (Cont. pages)	
21. MAIL INVOICE TO:							
a. NAME Office of Cuba Broadcasting						17(i). GRAND TOTAL	
b. STREET ADDRESS (or P.O. Box) 4201 N.W. 77th Avenue							
c. CITY Miami		d. STATE FL	e. ZIP CODE 33166		\$150.00		
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) Mary Ann Amps TITLE: CONTRACTING/ORDERING OFFICER			

NSN 7540-01-152-8083

PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 6/95)

Prescribed by GSA/FAR (48 CFR) 53.213(e)



# ORDER FOR SUPPLIES OR SERVICES

## SCHEDULE - CONTINUATION

PAGE OF PAGES

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**IMPORTANT:** Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER

CONTRACT NO.

09/11/2001

ORDER NO.

P110-8252

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	Total amount of award: \$150.00. The obligation for this award is shown in box 17(i).					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

# ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 3

IMPORTANT: Mark all packages and papers with contract and/or order numbers

1. DATE OF ORDER 07/24/2001		2. CONTRACT NO. (If any)		6. SHIP TO:			
3. ORDER NO. P110-8215		4. REQUISITION/REFERENCE NO. 00-2013		a. NAME OF CONSIGNEE Office of Cuba Broadcasting			
5. ISSUING OFFICE (Address correspondence to) Office of Cuba Broadcasting 4201 N.W. 77th Avenue Miami FL 33166				b. STREET ADDRESS 4201 N.W. 77th Avenue			
				c. CITY Miami	d. STATE FL	e. ZIP CODE 33166	
7. TO:				f. SHIP VIA			
a. NAME OF CONTRACTOR HELEN FERRE							
b. COMPANY NAME				8. TYPE OF ORDER			
c. STREET ADDRESS (b) (6)				<input checked="" type="checkbox"/> a. PURCHASE REFERENCE YOUR:		<input type="checkbox"/> b. DELIVERY Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
d. CITY (b) (6)				e. STATE (b) (6)	f. ZIP CODE (b) (6)		
9. ACCOUNTING AND APPROPRIATIONS DATA 9568-01-X0208-1085-1-448610-8051-2580				10. REQUISITIONING OFFICE Office of Cuba Broadcasting			
11. BUSINESS CLASSIFICATION (Check appropriate box(es))							
<input checked="" type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED							
12. F.O.B. POINT Destination		13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 07/17/2001	
a. INSPECTION Destination		b. ACCEPTANCE Destination				16. DISCOUNT TERMS Net 30	
17. SCHEDULE (See reverse for Rejections)							
ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)	
0001	Tax ID Number: (b) (6) DUNS Number: Not Available Serve as guest for the recording of round table discussion program "Actualidad Mundial" on 7/17/01 Continued ...	1	EA	75.00	75.00		
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h). TOTAL (Cont. pages)	
21. MAIL INVOICE TO:							
a. NAME Office of Cuba Broadcasting						\$0.00	
b. STREET ADDRESS (or P.O. Box) 4201 N.W. 77th Avenue							
c. CITY Miami		d. STATE FL	e. ZIP CODE 33166			\$75.00	
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) Mary Ann Amps TITLE: CONTRACTING/ORDERING OFFICER			

NSN 7540-01-152-8083

PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 6/95)

Prescribed by GSA/FAR (48 CFR) 53.213(a)



**ORDER FOR SUPPLIES OR SERVICES**  
**SCHEDULE - CONTINUATION**

PAGE OF PAGES

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**IMPORTANT:** Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER

CONTRACT NO.

ORDER NO.

07/24/2001

P110-8215

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	Total amount of award: \$75.00. The obligation for this award is shown in box 17(i).					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))



# ORDER FOR SUPPLIES OR SERVICES

PAGE 1 OF 3

1 3

IMPORTANT: Mark all packages and papers with contract and/or order numbers

1. DATE OF ORDER 06/21/2001		2. CONTRACT NO. (if any)		6. SHIP TO:			
3. ORDER NO. P110-8181		4. REQUISITION/REFERENCE NO. 00-2013		a. NAME OF CONSIGNEE Office of Cuba Broadcasting			
5. ISSUING OFFICE (Address correspondence to) Office of Cuba Broadcasting 4201 N.W. 77th Avenue Miami FL 33166				b. STREET ADDRESS 4201 N.W. 77th Avenue			
				c. CITY Miami	d. STATE FL	e. ZIP CODE 33166	
7. TO:				f. SHIP VIA			
a. NAME OF CONTRACTOR HELEN FERRE				8. TYPE OF ORDER			
b. COMPANY NAME				X a. PURCHASE REFERENCE YOUR:		b. DELIVERY	
c. STREET ADDRESS (b) (6)				Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheets, if any, including delivery as indicated.		Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
d. CITY (b) (6)							
e. STATE (b) (6)				f. ZIP CODE (b) (6)			
9. ACCOUNTING AND APPROPRIATIONS DATA 9568-01-X0208-1085-1-448610-8051-2580				10. REQUISITIONING OFFICE Office of Cuba Broadcasting			
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input checked="" type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED							
12. F.O.B. POINT Destination		13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 06/12/2001	
a. INSPECTION Destination		b. ACCEPTANCE Destination				16. DISCOUNT TERMS Net 30	
17. SCHEDULE (See reverse for Reflections)							
ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)	
0001	Tax ID Number: (b) (6) DUNS Number: Not Available Serve as guest for the recording of round table discussion program "Actualidad Mundial" on 6/12/01 Continued ...	1	EA	75.00	75.00		
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h). TOTAL (Cont. pages)	
21. MAIL INVOICE TO:							
a. NAME Office of Cuba Broadcasting		b. STREET ADDRESS 4201 N.W. 77th Avenue (or P.O. Box)				17(i). GRAND TOTAL	
c. CITY Miami		d. STATE FL	e. ZIP CODE 33166				
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) Mary Ann Amps TITLE: CONTRACTING/ORDERING OFFICER			

NSN 7540-01-152-8083

PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 5/65)

Prescribed by GSA/FAR (48 CFR) 53.213(a)

If desired, this order (or a copy thereof) may be used by the Contractor as the Contractor's invoice, instead of a separate invoice, provided the following statement, (signed and dated) is on (or attached to) the order: "Payment is requested in the amount of \$ \_\_\_\_\_. No other invoice will be submitted." However, if the Contractor wishes to submit an invoice, the following information must be provided; contract number (if any), order number, item number(s), description of supplies or service, sizes, quantities, unit prices, and extended totals. Prepaid shipping costs will be indicated as a separate item on the invoice. Where shipping costs exceed \$10 (except for parcel post), the billing must be supported by a bill of lading or receipt. When several orders are invoiced to an ordering activity during the same billing period, consolidated periodic billings are encouraged.

Quantity in the "Quantity Accepted" column on the face of this order has been: ☐ inspected, ☐ accepted, ☐ received  
by me and conforms to this contract. Items listed below have been rejected for the reasons indicated.

SHIPMENT NUMBER	PARTIAL		DATE RECEIVED	SIGNATURE OF AUTHORIZED U.S. GOV'T REP.	DATE
	FINAL				
TOTAL CONTAINERS		GROSS WEIGHT	RECEIVED AT	TITLE	

[illegible]

**ORDER FOR SUPPLIES OR SERVICES**  
**SCHEDULE - CONTINUATION**

PAGE OF PAGES

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**IMPORTANT:** Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER

CONTRACT NO.

06/21/2001

ORDER NO.

P110-8181

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	Total amount of award: \$75.00. The obligation for this award is shown in box 17(i).					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

# ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 3

IMPORTANT: Mark all packages and papers with contract and/or order numbers

1. DATE OF ORDER 05/11/2001		2. CONTRACT NO. (If any)		6. SHIP TO:			
3. ORDER NO. P110-8160		4. REQUISITION/REFERENCE NO. 00-2013		a. NAME OF CONSIGNEE Office of Cuba Broadcasting			
5. ISSUING OFFICE (Address correspondence to) Office of Cuba Broadcasting 4201 N.W. 77th Avenue Miami FL 33166				b. STREET ADDRESS 4201 N.W. 77th Avenue			
				c. CITY Miami	d. STATE FL	e. ZIP CODE 33166	
7. TO:				f. SHIP VIA			
a. NAME OF CONTRACTOR HELEN FERRE							
b. COMPANY NAME				8. TYPE OF ORDER			
c. STREET ADDRESS (b) (6)				X a. PURCHASE REFERENCE YOUR:		b. DELIVERY	
				Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheets, if any, including delivery as indicated.		Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
d. CITY (b) (6)		e. STATE (b) (6)	f. ZIP CODE (b) (6)				
9. ACCOUNTING AND APPROPRIATIONS DATA 9568-01-X0208-1085-1-448610-8051-2580				10. REQUISITIONING OFFICE Office of Cuba Broadcasting			
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input checked="" type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED							
12. F.O.B. POINT Destination		13. PLACE OF a. INSPECTION Destination		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 05/08/2001	
		b. ACCEPTANCE Destination				16. DISCOUNT TERMS Net 30	
17. SCHEDULE (See reverse for Rejections)							
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)
0001	Tax ID Number: (b) (6) DUNS Number: Not Available  Serve as guest for the recording of round table discussion program "Actualidad Mundial" on 5/8/01 Continued ...			2	EA	75.00	150.00
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h). TOTAL (Cont. pages)	
SEE BILLING INSTRUCTIONS ON REVERSE		21. MAIL INVOICE TO:					
		a. NAME Office of Cuba Broadcasting				\$0.00	
		b. STREET ADDRESS (or P.O. Box) 4201 N.W. 77th Avenue					
		c. CITY Miami				\$150.00	
		d. STATE FL					
		e. ZIP CODE 33166					
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) Mary Ann Amps TITLE: CONTRACTING/ORDERING OFFICER			

**SUPPLEMENTAL INVOICING INFORMATION**

If desired, this order (or a copy thereof) may be used by the Contractor as the Contractor's invoice, instead of a separate invoice, provided the following statement, (signed and dated) is on (or attached to) the order: "Payment is requested in the amount of \$ \_\_\_\_\_. No other invoice will be submitted." However, if the Contractor wishes to submit an invoice, the following information must be provided; contract number (if any), order number, item number(s), description of supplies or service, sizes, quantities, unit prices, and extended totals. Prepaid shipping costs will be indicated as a separate item on the invoice. Where shipping costs exceed \$10 (except for parcel post), the billing must be supported by a bill of lading or receipt. When several orders are invoiced to an ordering activity during the same billing period, consolidated periodic billings are encouraged.

## RECEIVING REPORT

Quantity in the "Quantity Accepted" column on the face of this order has been: ☒ inspected, ☐ accepted, ☐ received  
by me and conforms to this contract. Items listed below have been rejected for the reasons indicated.

SHIPMENT NUMBER	PARTIAL		DATE RECEIVED	SIGNATURE OF AUTHORIZED U.S. GOV'T REP.	DATE
	FINAL				
TOTAL CONTAINERS		GROSS WEIGHT	RECEIVED AT	TITLE	

## REPORT OF REJECTIONS

[illegible]

**ORDER FOR SUPPLIES OR SERVICES**  
**SCHEDULE - CONTINUATION**

PAGE OF PAGES

3

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**IMPORTANT:** Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER

CONTRACT NO.

05/11/2001

ORDER NO.

P110-8160

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	Total amount of award: \$150.00. The obligation for this award is shown in box 17(i).					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

# ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 3

**IMPORTANT: Mark all packages and papers with contract and/or order numbers**

1. DATE OF ORDER 09/28/2001		2. CONTRACT NO. (If any)		6. SHIP TO:			
3. ORDER NO. P110-8269		4. REQUISITION/REFERENCE NO. 00-2013		a. NAME OF CONSIGNEE Office of Cuba Broadcasting			
5. ISSUING OFFICE (Address correspondence to) Office of Cuba Broadcasting 4201 N.W. 77th Avenue Miami FL 33166				b. STREET ADDRESS 4201 N.W. 77th Avenue			
				c. CITY Miami	d. STATE FL	e. ZIP CODE 33166	
7. TO:				f. SHIP VIA			
a. NAME OF CONTRACTOR HELEN FERRE				8. TYPE OF ORDER			
b. COMPANY NAME				<input checked="" type="checkbox"/> a. PURCHASE REFERENCE YOUR:  Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheets, if any, including delivery as indicated.			
c. STREET ADDRESS (b) (6)				<input type="checkbox"/> b. DELIVERY Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.			
d. CITY (b) (6)		e. STATE (b) (6)	f. ZIP CODE (b) (6)				
9. ACCOUNTING AND APPROPRIATIONS DATA 9568-01-X0208-1085-1-448610-8051-2580				10. REQUISITIONING OFFICE Office of Cuba Broadcasting			
11. BUSINESS CLASSIFICATION (Check appropriate box(es))							
<input checked="" type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED							
12. F.O.B. POINT Destination		13. PLACE OF		14. GOVERNMENT B/L/NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 09/25/2001	
a. INSPECTION Destination		b. ACCEPTANCE Destination				16. DISCOUNT TERMS Net 30	
17. SCHEDULE (See reverse for Rejections)							
ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)	
0001	Tax ID Number: (b) (6) DUNS Number: Not Available Serve as guest for the recording of round table discussion program "Actualidad Mundial" on 9/25/01 Continued ...	1	EA	75.00	75.00		
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h). TOTAL (Cont. pages)	
21. MAIL INVOICE TO:							
a. NAME Office of Cuba Broadcasting						17(i). GRAND TOTAL	
b. STREET ADDRESS (or P.O. Box) 4201 N.W. 77th Avenue							
c. CITY Miami		d. STATE FL	e. ZIP CODE 33166				
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) Mary Ann Amps TITLE: CONTRACTING/ORDERING OFFICER			

NSN 7540-01-152-8083

PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 8/85)

Prescribed by GSA/FAR (48 CFR) 53.213(e)

If desired, this order (or a copy thereof) may be used by the Contractor as the Contractor's invoice, instead of a separate invoice, provided the following statement, (signed and dated) is on (or attached to) the order: "Payment is requested in the amount of \$ \_\_\_\_\_. No other invoice will be submitted." However, if the Contractor wishes to submit an invoice, the following information must be provided; contract number (if any), order number, item number(s), description of supplies or service, sizes, quantities, unit prices, and extended totals. Prepaid shipping costs will be indicated as a separate item on the invoice. Where shipping costs exceed \$10 (except for parcel post), the billing must be supported by a bill of lading or receipt. When several orders are invoiced to an ordering activity during the same billing period, consolidated periodic billings are encouraged.

Quantity in the "Quantity Accepted" column on the face of this order has been: ☐ inspected, ☐ accepted, ☐ received  
by me and conforms to this contract. Items listed below have been rejected for the reasons indicated.

## REPORT OF REJECTIONS

OPTIONAL FORM 347 (Rev. 6/95) (BACK)



# ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

## SCHEDULE - CONTINUATION

3

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**IMPORTANT:** Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER CONTRACT NO.

09/28/2001

ORDER NO.

P110-8269

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	Total amount of award: \$75.00. The obligation for this award is shown in box 17(i).					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

ORDER FOR SUPPLIES OR SERVICES						PAGE OF PAGES 1 3		
<b>IMPORTANT: Mark all packages and papers with contract and/or order numbers</b>								
1. DATE OF ORDER 11/08/2001		2. CONTRACT NO. (If any)		6. SHIP TO:				
3. ORDER NO. P210-8048		4. REQUISITION/REFERENCE NO. 11-3110		a. NAME OF CONSIGNEE Office of Cuba Broadcasting				
5. ISSUING OFFICE (Address correspondence to) Office of Cuba Broadcasting 4201 N.W. 77th Avenue Miami FL 33166				b. STREET ADDRESS 4201 N.W. 77th Avenue				
				c. CITY Miami		d. STATE FL	e. ZIP CODE 33166	
7. TO:				f. SHIP VIA				
a. NAME OF CONTRACTOR HELEN FERRE								
b. COMPANY NAME				8. TYPE OF ORDER				
c. STREET ADDRESS (b) (6)				<input checked="" type="checkbox"/> a. PURCHASE REFERENCE YOUR:  Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheets, if any, including delivery as indicated.		<input type="checkbox"/> b. DELIVERY  Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.		
d. CITY (b) (6)		e. STATE (b) (6)	f. ZIP CODE (b) (6)					
9. ACCOUNTING AND APPROPRIATIONS DATA 9568-02-X0208-1085-2-448610-8051-2580				10. REQUISITIONING OFFICE Office of Cuba Broadcasting				
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input checked="" type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED								
12. F.O.B. POINT Destination		13. PLACE OF		14. GOVERNMENT B/L/NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 10/30/2001		
a. INSPECTION Destination		b. ACCEPTANCE Destination				16. DISCOUNT TERMS Net 30		
17. SCHEDULE (See reverse for Rejections)								
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	Tax ID Number: (b) (6) DUNS Number: Not Available  Serve as guest for the recording of round table discussion program "Actualidad Mundial" on 10/30/01 Continued ...			1	EA	75.00	75.00	
SEE BILLING INSTRUCTIONS ON REVERSE	18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h). TOTAL (Cont. pages)	
	21. MAIL INVOICE TO:							
	a. NAME Office of Cuba Broadcasting						\$0.00	
	b. STREET ADDRESS (or P.O. Box) 4201 N.W. 77th Avenue						\$75.00	
c. CITY Miami		d. STATE FL	e. ZIP CODE 33166					
22. UNITED STATES OF AMERICA BY (Signature)					23. NAME (Typed) Mary Ann Amps TITLE: CONTRACTING/ORDERING OFFICER			

If desired, this order (or a copy thereof) may be used by the Contractor as the Contractor's invoice, instead of a separate invoice, provided the following statement, (signed and dated) is on (or attached to) the order: "Payment is requested in the amount of \$ \_\_\_\_\_. No other invoice will be submitted." However, if the Contractor wishes to submit an invoice, the following information must be provided; contract number (if any), order number, item number(s), description of supplies or service, sizes, quantities, unit prices, and extended totals. Prepaid shipping costs will be indicated as a separate item on the invoice. Where shipping costs exceed \$10 (except for parcel post), the billing must be supported by a bill of lading or receipt. When several orders are invoiced to an ordering activity during the same billing period, consolidated periodic billings are encouraged.

Quantity in the "Quantity Accepted" column on the face of this order has been: ☐ Inspected, ☐ accepted, ☐ received  
by me and conforms to this contract. Items listed below have been rejected for the reasons indicated.

SHIPMENT NUMBER	PARTIAL		DATE RECEIVED	SIGNATURE OF AUTHORIZED U.S. GOV'T REP.	DATE
	FINAL				
TOTAL CONTAINERS		GROSS WEIGHT	RECEIVED AT	TITLE	

[illegible]

# ORDER FOR SUPPLIES OR SERVICES

## SCHEDULE - CONTINUATION

PAGE OF PAGES

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**IMPORTANT:** Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER

CONTRACT NO.

11/08/2001

ORDER NO.

P210-8048

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	Total amount of award: \$75.00. The obligation for this award is shown in box 17(i).					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

<b>ORDER FOR SUPPLIES OR SERVICES</b>						PAGE OF PAGES 1 3		
<b>IMPORTANT: Mark all packages and papers with contract and/or order numbers</b>								
1. DATE OF ORDER 11/26/2001		2. CONTRACT NO. (If any)		6. SHIP TO:				
3. ORDER NO. P210-8058		4. REQUISITION/REFERENCE NO. 11-3110		a. NAME OF CONSIGNEE Office of Cuba Broadcasting				
5. ISSUING OFFICE (Address correspondence to) Office of Cuba Broadcasting 4201 N.W. 77th Avenue Miami FL 33166				b. STREET ADDRESS 4201 N.W. 77th Avenue				
				c. CITY Miami		d. STATE FL	e. ZIP CODE 33166	
7. TO:				f. SHIP VIA				
a. NAME OF CONTRACTOR HELEN FERRE				8. TYPE OF ORDER				
b. COMPANY NAME				<input checked="" type="checkbox"/> a. PURCHASE REFERENCE YOUR:		<input type="checkbox"/> b. DELIVERY		
c. STREET ADDRESS (b) (6)				Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheets, if any, including delivery as indicated.		Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.		
d. CITY (b) (6)		e. STATE (b) (6)		f. ZIP CODE (b) (6)				
9. ACCOUNTING AND APPROPRIATIONS DATA 9568-02-X0208-1085-2-448610-8051-2580				10. REQUISITIONING OFFICE Office of Cuba Broadcasting				
11. BUSINESS CLASSIFICATION (Check appropriate box(es)) <input checked="" type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED								
12. F.O.B. POINT Destination		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 11/20/2001		16. DISCOUNT TERMS Net 30		
13. PLACE OF a. INSPECTION Destination		b. ACCEPTANCE Destination		17. SCHEDULE (See reverse for Rejections)				
ITEM NO. (a)	SUPPLIES OR SERVICES (b)			QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)
0001	Tax ID Number: (b) (6) DUNS Number: Not Available  Serve as guest for the recording of round table discussion program "Actualidad Mundial" on 11/20/01 Continued ...			1	EA	75.00	75.00	
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h). TOTAL (Cont. pages)		
21. MAIL INVOICE TO:		a. NAME Office of Cuba Broadcasting		b. STREET ADDRESS 4201 N.W. 77th Avenue (or P.O. Box)		\$0.00		
c. CITY Miami		d. STATE FL		e. ZIP CODE 33166		\$75.00		
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) Mary Ann Amps TITLE: CONTRACTING/ORDERING OFFICER				



**ORDER FOR SUPPLIES OR SERVICES  
SCHEDULE - CONTINUATION**

PAGE OF PAGES

3

3

**IMPORTANT:** Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER

CONTRACT NO.

ORDER NO.

11/26/2001

P210-8058

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	Total amount of award: \$75.00. The obligation for this award is shown in box 17(i).					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))

# ORDER FOR SUPPLIES OR SERVICES

PAGE OF PAGES

1 3

**IMPORTANT: Mark all packages and papers with contract and/or order numbers**

1. DATE OF ORDER 12/13/2001		2. CONTRACT NO. (If any)		6. SHIP TO:			
3. ORDER NO. P210-8071		4. REQUISITION/REFERENCE NO. 11-3110		a. NAME OF CONSIGNEE Office of Cuba Broadcasting			
5. ISSUING OFFICE (Address correspondence to) Office of Cuba Broadcasting 4201 N.W. 77th Avenue Miami FL 33166				b. STREET ADDRESS 4201 N.W. 77th Avenue			
				c. CITY Miami	d. STATE FL	e. ZIP CODE 33166	
7. TO:				f. SHIP VIA			
a. NAME OF CONTRACTOR HELEN FERRE							
b. COMPANY NAME				8. TYPE OF ORDER			
c. STREET ADDRESS (b) (6)				X a. PURCHASE REFERENCE YOUR:		b. DELIVERY	
				Please furnish the following on the terms and conditions specified on both sides of this order and on the attached sheets, if any, including delivery as indicated.		Except for billing instructions on the reverse, this delivery order is subject to instructions contained on this side only of this form and is issued subject to the terms and conditions of the above-numbered contract.	
d. CITY (b) (6)		e. STATE (b) (6)	f. ZIP CODE (b) (6)				
9. ACCOUNTING AND APPROPRIATIONS DATA 9568-02-X0208-1085-2-448610-8051-2580				10. REQUISITIONING OFFICE Office of Cuba Broadcasting			
11. BUSINESS CLASSIFICATION (Check appropriate box(es))							
<input checked="" type="checkbox"/> a. SMALL <input type="checkbox"/> b. OTHER THAN SMALL <input type="checkbox"/> c. DISADVANTAGED <input type="checkbox"/> d. WOMEN-OWNED							
12. F.O.B. POINT Destination		13. PLACE OF		14. GOVERNMENT B/L NO.		15. DELIVER TO F.O.B. POINT ON OR BEFORE (Date) 12/04/2001	
a. INSPECTION Destination		b. ACCEPTANCE Destination				16. DISCOUNT TERMS Net 30	
17. SCHEDULE (See reverse for Rejections)							
ITEM NO. (a)	SUPPLIES OR SERVICES (b)	QUANTITY ORDERED (c)	UNIT (d)	UNIT PRICE (e)	AMOUNT (f)	QUANTITY ACCEPTED (g)	
0001	Tax ID Number: (b) (6) DUNS Number: Not Available Serve as guest for the recording of round table discussion program "Actualidad Mundial" on 12/4/01 Continued ...	2	EA	75.00	150.00		
18. SHIPPING POINT		19. GROSS SHIPPING WEIGHT		20. INVOICE NO.		17(h). TOTAL (Cont. pages)	
21. MAIL INVOICE TO:							
a. NAME Office of Cuba Broadcasting		\$0.00				17(i). GRAND TOTAL	
b. STREET ADDRESS (or P.O. Box) 4201 N.W. 77th Avenue							
c. CITY Miami		d. STATE FL	e. ZIP CODE 33166		\$150.00		
22. UNITED STATES OF AMERICA BY (Signature)				23. NAME (Typed) Mary Ann Amps TITLE: CONTRACTING/ORDERING OFFICER			

NSN 7540-01-152-8083

PREVIOUS EDITION NOT USABLE

OPTIONAL FORM 347 (Rev. 6-95)

Prescribed by GSA/FAR (48 CFR) 53.213(e)



**SUPPLEMENTAL INVOICING INFORMATION**

If desired, this order (or a copy thereof) may be used by the Contractor as the Contractor's invoice, instead of a separate invoice, provided the following statement, (signed and dated) is on (or attached to) the order: "Payment is requested in the amount of \$ \_\_\_\_\_. No other invoice will be submitted." However, if the Contractor wishes to submit an invoice, the following information must be provided; contract number (if any), order number, item number(s), description of supplies or service, sizes, quantities, unit prices, and extended totals. Prepaid shipping costs will be indicated as a separate item on the invoice. Where shipping costs exceed \$10 (except for parcel post), the billing must be supported by a bill of lading or receipt. When several orders are invoiced to an ordering activity during the same billing period, consolidated periodic billings are encouraged.

## RECEIVING REPORT

Quantity in the "Quantity Accepted" column on the face of this order has been: ☐ inspected, ☐ accepted, ☐ received  
by me and conforms to this contract. Items listed below have been rejected for the reasons indicated.

SHIPMENT NUMBER	PARTIAL		DATE RECEIVED	SIGNATURE OF AUTHORIZED U.S. GOV'T REP.	DATE
	FINAL				
TOTAL CONTAINERS		GROSS WEIGHT	RECEIVED AT	TITLE	

## REPORT OF REJECTIONS

[illegible]

**ORDER FOR SUPPLIES OR SERVICES  
SCHEDULE - CONTINUATION**

PAGE OF PAGES

3

3

**IMPORTANT:** Mark all packages and papers with contract and/or order numbers.

DATE OF ORDER  
12/13/2001

CONTRACT NO.

ORDER NO.

P210-8071

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY ORDERED (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)	QUANTITY ACCEPTED (G)
	Total amount of award: \$150.00. The obligation for this award is shown in box 17(i).					

TOTAL CARRIED FORWARD TO 1ST PAGE (ITEM 17(H))